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Approved for use through 10/31/2002. OMB 0651-0031

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FORM**

(to be used for all correspondence after initial filing)

| | | | |
|---|-----------------------------|-------------------------------|-----------------|
| Application Number | 09/914,718 ✓ | | |
| | Filing Date | 08/31/01 | |
| | First Named Inventor | Karube | |
| | Group Art Unit | Unassigned | |
| | Examiner Name | Unassigned. | |
| Total Number of Pages in This Submission | 1 | Attorney Docket Number | 082369-000000US |

ENCLOSURES (check all that apply)

| | | |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) two (2) cited references 2) Return receipt postcard |
| Remarks | | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. Total number of pages <u>does not</u> include cited references. |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|---------------------------------|--|-----------------------|
| Firm and Individual name | Townsend and Townsend and Crew LLP Joe Liebeschuetz | Reg No. 37,505 |
| Signature | | |
| Date | March 15, 2002 | |

CERTIFICATE OF MAILING

| | | | |
|---|---------------|-------------|----------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: March 15, 2002 | | | |
| Typed or printed name | Chris Fitting | | |
| Signature | | Date | March 15, 2002 |

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PA 3208297 v1



JOH Rec'd PCT/PTO 25 MAR 2002

PATENT

Attorney Docket No.: 082369-000000US

Client Reference No.: SEN-102PCT-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

KARUBE, Isao

Application No.: 09/914,718

Filed: August 31, 2001

For: Two-Dimensional Separating
Method

Examiner: Unassigned

Art Unit: Unassigned

INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

The references cited on attached form PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information, and no inference should be made that the information and references cited are, or are considered to be material to patentability because they are in this statement. No inference should be made that the information and references cited are prior art merely because they are in this statement.

Applicant believes that no fee is required for submission of this statement, since it is being submitted prior to the first Office Action. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Joe Liebeschuetz
Reg. No. 37,505

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PTO/SB/08B (08-00)



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Substitute for form 1449B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet

1

of

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Complete if Known

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|------------------------|-----------------|
| Application Number | 09/914,718 |
| Filing Date | August 31, 2001 |
| First Named Inventor | Karube, Isao |
| Group Art Unit | Unassigned |
| Examiner Name | Unassigned |
| Attorney Docket Number | 082369-000000US |

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MAR 25 2002
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OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS

| Examiner Initials * | Cite No. ¹ | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T ² |
|------------------------|--------------------------|---|----------------|
| | AA | BECKER, et al., "Planar quartz chips with submicron channels for two-dimensional capillary electrophoresis applications," <u>J. Micromach. Microeng.</u> , 8:24-28 (1998). | |
| | AB | ROCKLIN, et al., "A Microfabricated Fluidic Device for Performing Two-Dimensional Liquid-Phase Separations," <u>Anal. Chem.</u> , 72:5244-5249 (2000). | |
| | | | |
| | | | |
| | | | |

Examiner
Signature

Date
Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

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